

## ISSUE SLIP STAPLE AREA (for traditional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	DT		12-2-59
O.I.P.E. CLASSIFIER		12	12/18
FORMALITY REVIEW	Er	64930	12-23

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date							
	Final	Original	1	2	3	4	5	6
1	✓	✓						
2	✓	✓						
3	✓	✓						
4	✓	✓						
5	✓	✓						
6	✓	✓						
7	✓	✓						
8	✓	✓						
9	✓	✓						
10	✓	✓						
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Claim	Date							
	Final	Original	51	52	53	54	55	56
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Claim	Date							
	Final	Original	110	112	113	114	115	116
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If more than 150 claims or 10 actions  
staple additional sheet here

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